

Form V-1

EXPERIENCE VERIFICATION FORM

V-1 forms must be sent to your PE supervisors and/or associates **(must have been licensed prior to the time being verified)** with a stamped, addressed return envelope for all engineering engagements listed on your application under question 19 that can be verified - This form may be duplicated

TO BE COMPLETED BY APPLICANT:

Applicant's Name: _____

Name of PE Endorser _____ ☐ PE Supervisor ☐ PE Associate

Engineering experience to be verified for Engagement Number _____ where employed as a

_____ ☐ Full Time ☐ Part Time Hours per week _____
(title of position)

with the firm of _____

Dates of PE supervision/association from _____ to _____ Total Months _____

Duties & Responsibilities Performed _____

(continue on attached sheet if needed)

TO BE COMPLETED BY ENDORSER: (You must have been licensed prior to the time being verified)

Do you concur with the above applicant's: title, time, and duties and responsibilities performed? ☐ Yes ☐ No

My contacts with the applicant were during the period of time from _____ to _____

where I was employed with the firm of _____

☐ As the applicant's PE supervisor ☐ As a PE associate employed in the same firm & location in engineering work

If neither of the above were the case, state basis of contact _____

Comments: _____

(continue on attached sheet if needed)

Further comments on applicant's ability, character, professional attitude and responsibility in work performed: _____

Based on the definition of the practice of engineering, do you recommend the applicant for PE licensure? ☐ Yes ☐ No

Print Name _____

State of PE License _____ License Number _____ Date PE License received _____

Present Position _____ Firm _____

Address _____ Day-time telephone number (_____) _____

Signature _____ Date _____

Information should correspond with Experience Record

Instructions for the applicant

On this side of the form - Type your name and address, the name and address of the endorser and insert the filing deadline date below. Send to your endorser with a stamped addressed envelope.

On the other side of this form - complete the section
"TO BE COMPLETED BY THE APPLICANT"

State of Alabama
Board of Licensure for
Professional Engineers and Land Surveyors
P.O. Box 304451
Montgomery, AL 36130-4451
(334) 242-5568 - www.bels.alabama.gov

Overnight Address Only:
The RSA Union
100 North Union Street #382
Montgomery, AL 36104-3702

(Name and Address of Endorser)

(Name and Address of Applicant)

I have filed my application with the Alabama Board of Licensure for Professional Engineers and Land Surveyors for licensure to practice **professional engineering** in the State of Alabama. I have listed your name as my Engineering Supervisor or Engineering Associate for the engagement period shown. As a part of my application, I have submitted to the Board Office a signed, sworn and notarized certification of release statement authorizing "any individual, company or institution with whom I have been associated to furnish the Alabama State Board of Licensure for Professional Engineers and Land Surveyors with any information concerning my qualifications for professional licensure in Alabama which they have on record or otherwise and do hereby release the individual, company or institution and all individuals connected therewith from all liability for any damage whatsoever incurred by me as a result of their furnishing such information."

I will appreciate your sending the information requested on the reverse side directly to the Board in the stamped addressed envelope which I have provided.

(Signature of the Applicant)

Board Statement to PE Endorser:

This Board is required by law to ascertain that the applicant has met the experience requirement sections of the Licensure Law; therefore, we need this experience verification form completed, signed and returned by you.

Since the Board cannot consider an applicant for licensure or admit a candidate for examination until replies are received from endorser, a prompt reply will expedite our handling of the applicant's request for licensure.

In order for the applicant's file to be considered at the next Board Meeting, all replies from references and endorser must be received in the Board Office

before _____ (filing deadline)

*This completed experience verification form is to be mailed directly to the Board Office in the enclosed stamped addressed envelope. **The comments you give will be treated in the strictest confidence; however, should your verification of time differ from that listed by the applicant, we will advise the applicant. The Board Office will not be responsible for the delay of this form being received in our office by the above deadline due to the mail service or by the endorser.***